



# KANSAS HIV/STD SURVEILLANCE UPDATE

Kansas Department of Health and Environment, Bureau of Epidemiology and Disease Prevention

This AIDS Ribbon was designed by the Capital Area Chapter of the American Red Cross to raise hope and awareness in Kansas and support the fight against HIV/AIDS.

**VOL. 3 #1**

**DOUBLE ISSUE**

**OCTOBER, 2002**

***“Members of the African-American and Hispanic communities continue to be disproportionately impacted by early syphilis. ”***

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## Our Mission:

The HIV/STD section works to promote public health and enhance the quality of life for Kansas residents by the prevention, intervention, and treatment of HIV and other STDs. The mission will be accomplished through policy and resource development, clinical data collection and analysis, research, education, prevention programs, disease detection, and the provision of treatment and clinical care services.

**HIV/STD Surveillance Update** is a semi-annual publication of the Kansas Department of Health and Environment with funding assistance from the Centers for Disease Control and Prevention.

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HIV/STD Director. . . . . 785-296-6036

HIV/STD Deputy Director. . . . . 785-296-5598

HIV Main Office. . . . . 785-296-6173

STD Main Office. . . . . 785-296-5596

Data Request HIV/AIDS. . . . . 785-296-5587

SHAS Project. . . . . 785-296-5597

Data Request STD. . . . . 785-296-6544

Ryan White Title II Services. . . 785-296-870/8891  
or 316-337-6136

HIV Prevention Director. . . . . 785-296-5223

HIV Counseling/Testing. . . . . 785-296-5588

HIV/STD Training/Education. . . . 785-296-6545

HIV/STD Partner Notification. . . . 785-296-6177

#### **Official Name of the New Building**

The move to the new building is complete and the official name has been chosen. The new building is the Curtis Building. As a reminder, our new address is:

Curtis Building  
1000 SW Jackson  
Suite 210  
Topeka, KS 66612-1274

#### **New HIV/STD Staff**

The HIV/STD Section has hired 3 new staff members since 6-1-01. They are:

1. Jason Ybarra is a new Disease Intervention Specialist (DIS) in Wichita, who comes to the position with experience working with adolescents at Big Brothers/Big Sisters in Wichita.
2. Tamika Julian-Gray is the new HIV Epidemiologist. She comes to the position with experience Health Surveillance.
3. Jeni Trimble is the new HIV/STD Surveillance Program Director. She has worked as a DIS in the past and most recently held the position of Supplement to HIV & AIDS Surveillance (SHAS) program Manager.
4. Angela Toney is the new Field Director for the Ryan White CARE Program. She comes to the position as the previous epidemiologist at Sedgwick County Health Department.

#### **KANSAS INFERTILITY PREVENTION PROJECT (KIPP) UPDATE**

The Kansas Infertility Prevention Project (KIPP) is a collaborative effort between Family Planning and STD Programs in the four states that make up Region VII (Kansas, Nebraska, Missouri, and Iowa) that focuses on the prevention and early treatment of chlamydial infections. There are 112 sites enrolled in Kansas screening females for chlamydia and gonorrhea. Each site participates in a quality assurance program which includes unsatisfactory specimens, screening criteria, data collection, data accuracy, patient/partner treatment and education.

Within the project the, in the first half of 2002 the cost of the new technology (nucleic acid amplified test, NAAT), along with the declining availability of state dollars, required a change in the screening criteria. The new criteria will allow continued screening of very high risk females (24 years of age and under). In Family Planning Clinics the positivity rate for females 24 and under is twice the rate for females 30 and over.

**Effective May 1, 2002**

**Under the new Region VII Infertility Prevention Project guidelines, the following individuals should be screened:**

#### **STD Clinics**

**Screen All Women**

#### **Prenatal Clinics**

**Screen All at First Visit; Re-screen All Women Who Tested Positive at First Screen (must wait at least 3 weeks after completion of treatment)**

#### **Family Planning and All Other Clinics**

**All Women ≤24 years of age**

**Women 25 to 29 years of age with at least one of the following:**

- ▶ Recent Contact to a Male with Urethritis, Known Chlamydia or Other STD
- ▶ Signs or Symptoms Suggesting Chlamydia Infection: Cervicitis, Urethritis, or Pelvic Inflammatory Disease (PID)

**\*\*The state lab will no longer accept specimens of females over 29 years of age from Family Planning Clinics. These individuals may be screened but the specimens should be sent to private laboratories.**

**Males should not be tested as part of the Infertility Prevention Project.**

### **The Kansas Continuum of HIV/STD Prevention and Care Services (12/31/01)**

The public health infrastructure for combating HIV disease in Kansas utilizes both state and federal funding. Under guidance from federal agencies including the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA), Kansas has a continuum of services designed to provide public access to the various prevention and care needs oriented toward fighting HIV disease within our society. These services range from outreach prevention targeted to individuals most at risk for becoming infected with HIV to Ryan White CARE services that provide clinical care and medications to those infected with HIV. They include counseling and testing and active disease intervention in addition to sexually transmitted disease screening for other diseases. Below, is a summary of data reflecting progress pertaining to many of the interventions occurring within the spectrum of HIV related continuum offered to Kansas citizens.

#### **HIV Prevention and Linked Testing (PLT)**

- Publicly funded HIV Prevention targeting high risk behaviors interact with approximately 15,000 individuals a year with an estimated 30,000 total interactions.
- From January 1, 2001, through December 31, 2001, 970 (8.4%) of the 11,492 people tested at public testing sites indicated they had been referred to HIV counseling and testing. Of these, 104 were referred by federal and state funded prevention and care services.
- The Orasure pilot program linking testing directly to prevention in outreach and other settings found 13 positive tests in the first two and one half years with a positivity rate of 0.72%. This compares to the 0.24%, 0.26%, and 0.24% positivity rates for the standard counseling and testing system in 1999, 2000 and 2001 respectively.
- Cumulatively, of the 65 positive HIV individuals found through public testing sites since July 1, 1999, 22 (34%) had referral codes listed. There were 6 positive partners to clients in Ryan White Prevention Case Management directly linked to the pilot Orasure testing. Disease intervention tested or referred 16 new positives while 1 was a physician referral and 1 was referred from emergency medical treatment and 2 were referred from funded HIV Prevention projects.

### **Public HIV Counseling and Testing (CTS)**

- From January 1, 2001 through December 31, 2001 11,465 specimens were submitted for HIV testing from contracted Counseling and Testing Sites (CTS) throughout Kansas.
- The percentage confidentially tested cumulatively is 90%, with 10% anonymous.
- Cumulatively, since July 1, 1999, 65 newly diagnosed cases of HIV have been found through public testing representing 17% of the 372 newly diagnosed HIV cases. For 2000 and 2001, 21% and 20% respectively were found through counseling and testing sites.
- Of the 65 HIV positive individuals tested at CTS since July 1, 1999, 31 (48%) have enrolled in Ryan White Services, 2 are enrolled in Medicaid, 7 had private health insurance, 4 had Other Public assistance, 1 self pay, 3 have no coverage and 17 are unknown regarding reimbursement for HIV care services. Individuals enrolled in Ryan White may also be enrolled in Medicaid. Data are updated as received and may change.

### **Partner Counseling and Referral Services (PCRS)**

- During calendar year 2001, Disease Intervention Specialists interviewed a total of 101 HIV and AIDS diagnosed individuals in Kansas. This compares to 103 in the first year of HIV reporting. From this activity, 85 individuals were counseled and tested and 8 (9%) were found to be positive directly by disease intervention specialists.
- Cumulatively, since July 1, 1999, 22 (16 through CTS) new cases of HIV have been discovered as a result of disease intervention activities representing (6%) of the 372 newly diagnosed cases reported.
- Of the 8 newly diagnosed cases found as a result of PCRS in 2001, 5 (63%) were referred to Ryan White Care Services, 2 (26%) have other medical insurance coverage and 1 (13%) does not have any known coverage.

## Syphilis Analysis and Update of Morbidity

Reported cases of early syphilis (less than one year's duration) had been declining in Kansas from 1991 to 2000, but in 2001 Kansas reported a three fold increase in early syphilis. Forty-four cases of early syphilis was reported during calendar year 2001. Additionally, 19 cases of early syphilis have been reported in the first half of 2002, which is a 46 percent (6 case) increase compared to first half of 2001.

As in 2001, Shawnee County continues to report the majority of early syphilis cases in Kansas. Shawnee County accounted for 19 cases (43 percent) of all early syphilis for Kansas in 2001. Seven (37 percent) of reported early syphilis cases in the first half of 2002 were in Shawnee County. Sedgwick County had the second highest case total with 10 (23 percent) in 2001 and four (21 percent) in the first half of 2002.

Illicit drug use and prostitution continue to be the major link between most of these cases. Illicit drug use was reported by 45 percent (20/44) of the early syphilis cases and sex for drugs or money by 30 percent (13/44) of the early syphilis cases during 2001. During the first half of 2002, illicit drug use was reported by 63 percent (12/19) of early syphilis cases and sex for drugs or money by 47 percent (9/19) of early syphilis cases.

Members of the African-American and Hispanic communities continue to be disproportionately impacted by early syphilis. Although accounting for only 6 percent of the state's population, African Americans and Hispanics accounted for 52 percent (23 cases) and 27 percent (12 cases) of reported early syphilis cases respectively in 2001. The trend continues in the first half of 2002 with 47 percent (9 cases) of all first half 2002 early syphilis cases reported in the African-American community and 21 percent (4 cases) in the Hispanic community. Whites reported 21 percent (9 cases) in 2001 and 32 percent (6 cases) of early syphilis cases in the first half of 2002.

The HIV/STD Section discovered through syphilis investigations in the first half of 2002 that some clinics in Central and Eastern Kansas were not running routine non-treponemal tests for all STD patients at every visit unless a non-reactive test result had been recorded within the preceding 30 days. A public health advisory was issued in response to these findings to all providers, public and private, in Eastern and Central Kansas to encourage syphilis screening for all patients seeking care for STDs. It reads as follows:

### PUBLIC HEALTH ADVISORY

Dear Colleague:

I am writing to alert you on the possible presence of syphilis in your county. In 2002, a cluster of cases of syphilis has been identified in several counties in Eastern and Central Kansas. At least one of these cases was in a pregnant woman, with the potential of fetal infection. Many of these cases have been linked directly to another known source case. Of particular concern is the fact that some of these cases have a history of visiting a public or private clinic for a sexually transmitted disease problem in the weeks preceding the syphilis diagnosis, but no syphilis test was performed at the time of the first visit. As a result, prompt contact investigation could not be instituted, and at least three new cases of syphilis were later diagnosed among sexual contacts of these individuals.

In addition to its direct complications, syphilis has also the potential of facilitating HIV infection and causing congenital syphilis in the newborn. I am strongly recommending that you consider the following recommendations:

- Although rare, syphilis is still a disease that occurs in Kansas, and should be included in the differential diagnosis of all genital ulcers.

- Patients who visit a public or private clinic with a suspect or confirmed diagnosis of ***any sexual transmitted disease*** should be tested for syphilis (in accordance to current recommendations from the Centers for Disease Control and Prevention). A VDRL test can be obtained free of charge through our Kansas Health and Environmental Laboratories (785-296-1653).

I hope that you will find this information useful. If you have any questions, please contact your local health department or our Sexually Transmitted Disease program (785-296-5595).

Sincerely,  
Gianfranco Pezzino, MD, MPH  
State Epidemiologist, Medical Director  
Bureau of Epidemiology and Disease Prevention

## BASIC HIV/AIDS TRAINING SET FOR 2002

The Kansas Department of Health and Environment, American Red Cross, Development Systems, Inc., Kansas Department of Education, and Kansas State University, have scheduled basic HIV/AIDS skills-building training throughout Kansas during 2002. Brochures may be obtained by calling KSU at 1-800-432-8222, or <http://www.kdhe.state.ks.us/aids> or [http://www.dce.ksu.edu/dce/conf/HIV-AIDS\\_2002](http://www.dce.ksu.edu/dce/conf/HIV-AIDS_2002). Registration is required at least two weeks in advance. Continuing education credit is available for nurses (\$20) and KADACA (\$15). Scholarships are available, for HIV-infected persons by calling KDHE (785) 296-6545. Please call 785-296-6173 for other course information.

### Course Information

#### 1. HIV/STD Basic Training -

\$20 *Satisfactory completion required before attending other courses.* Includes American Red Cross HIV Starter Facts certification. Topics include: current transmission and prevention issues, including human sexuality and drug use; statistics; attitudes and terminology related to risk behaviors; and basic psychosocial needs of infected persons.

#### 2. Behavior Change Counseling Strategies -

\$20 *Must have satisfactorily completed Course 1.* Topics include: behavior change counseling concepts and skills; assisting clients in reducing risks of acquiring or transmitting HIV/STDs; helping clients improve perception of risk; negotiating realistic and incremental plans for clients to reduce risk; helping clients integrate test results emotionally, behaviorally, and socially; and resources/referrals for counselors.

#### 3. Basic HIV Program: Fundamentals -

\$25 *Must have satisfactorily completed Course 1.* Includes American Red Cross Fundamentals of Instructor Training certification. Topics include: sharing facts about HIV/AIDS accurately, nonjudgmentally, and sensitively with people from diverse groups and communities; discussing facts related to sensitive issues like sex/sexuality and drugs/drug use; encouraging people to apply facts about HIV/AIDS to their own behavior;

practicing using Modules 1 & 2 for working with community groups; assessing group needs; planning education sessions; facilitating interactive sessions; and making referrals to community resources.

— OR —

#### African/American, Native American or Hispanic Fundamentals -

\$25 *Must have satisfactorily completed Course 1.* Includes American Red Cross Fundamentals or Instructor Training certification. Successful completion includes certification for Fundamentals and Fundamentals for Persons of Color. Participants need not be persons of color to attend, although the majority must be members of the population for which the course was designed. *If the majority are NOT persons of color, participants will be given the option of attending for Fundamentals certification only (with the addition of culturally-specific information) or transferring registration to a future session.*

Topics include: awareness of the culture and psychosocial issues involved in the African American, Native American or Hispanic response to AIDS; basic and culturally sensitive factual information; ways to incorporate cultural elements into HIV prevention; answering questions about HIV/AIDS in a culturally sensitive and age appropriate manner; and challenges people of color face in prevention. Courses are taught by African American, Native American or Hispanic instructors in a comfortable, safe, fun, and culturally sensitive environment.

#### 4. Basic HIV Program: Prevention Skills -

\$20 *Satisfactory completion of Courses 1 and 3 or current Fundamentals certification are required before attending.* Topics include: facilitating skill-building activities related to HIV prevention behavior in factually accurate, culturally sensitive, and nonjudgmental ways; understanding the content format of activities in Modules 3 & 4; and identifying ways to use activities with persons age 17+.

## 2002 HIV PREVENTION TRAINING

Month	1. HIV/STD Basic Training Tuesday	2. Behavior Change Counseling Strategies Wednesday	3. Basic HIV Program: Fundamentals Tuesday, Wednesday & Thursday	4. Basic HIV Program: Prevention Skills Wednesday & Thursday
January	Topeka - 1/29/02 8:00 a.m. - 5:00 p.m.	Topeka - 1/30/02 8:00 a.m. - 5:00 p.m.		
February			Topeka - 02/26-28/02 Tuesday 1:00 p.m. - 5:00 p.m. Wednesday 8:00 a.m. - 5:00 p.m. Thursday 8:00 a.m. - 12:00 p.m.	
March	Wichita - 03/19/02 8:00 a.m. - 5:00 p.m.	Wichita - 03/20/02 8:00 a.m. - 5:00 p.m.		Topeka - 03/27-28/02 8:00 a.m. - 5:00 p.m.
April			(Hispanic) Wichita - 04/23-25/02 8:00 a.m. - 5:00 p.m.	
May	Pittsburg - 05/21/02 8:00 a.m. - 5:00 p.m.	Pittsburg - 05/22/02 8:00 a.m. - 5:00 p.m.		Wichita - 05/1-2/02 8:00 a.m. - 5:00 p.m.
June			(African/American) Topeka - 06/18-20/02 8:00 a.m. - 5:00 p.m.	
July	Kansas City - 07/30/02 8:00 a.m. - 5:00 p.m.	Kansas City - 07/31/02 8:00 a.m. - 5:00 p.m.		
August			Kansas City - 08/27-29/02 Tuesday 1:00 p.m. - 5:00 p.m. Wednesday 8:00 a.m. - 5:00 p.m. Thursday 8:00 a.m. - 12:00 p.m.	
September	Garden City - 09/10/02 8:00 a.m. - 5:00 p.m.	Garden City - 09/11/02 8:00 a.m. - 5:00 p.m.		Kansas City - 09/18-19/02 8:00 a.m. - 5:00 p.m.
October	Wichita - 10/29/02 8:00 a.m. - 5:00 p.m.	Wichita - 10/30/02 8:00 a.m. - 5:00 p.m.	(Native American) Wichita - 10/1-3/02 8:00 a.m. - 5:00 p.m.	
November			Wichita - 11/19-21/02 Tuesday 1:00 p.m. - 5:00 p.m. Wednesday 8:00 a.m. - 5:00 p.m. Thursday 8:00 a.m. - 12:00 p.m.	
December				Wichita - 12/11-12/02 8:00 a.m. - 5:00 p.m.

Notice of Nondiscrimination: Kansas State University is committed to a policy of nondiscrimination on the basis of race, sex, national origin, disability, religion, age, sexual orientation, or other non-merit reasons, in admissions, educational programs or activities, and employment (including employment of disabled veterans and veterans of the Vietnam Era), all as required by applicable laws and regulations.

**Kansas Incidence, Prevalence and Cumulative AIDS Cases as of December 2001**

	Kansas Incident* AIDS Cases July 2001 - December 2001		Kansas Prevalent*** AIDS Cases as of December 2001		Kansas Cumulative*** AIDS Cases as of December 2001		U.S. Cumulative*** AIDS Cases as of July 2001	
Cases	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Adult/Adolescent	35	100.00	980	99.59	2371	99.50	745,103	98.83
Pediatrics (<13 Years)	0	0.00	4	0.41	17	0.50	8,804	1.17
Total	35	100.00	984	100.00	2383	100.00	753,907	100.00
<b>Age</b>								
<13	0	0.00	4	0.41	12	0.50	8,804	1.17
13-19	0	0.00	10	1.02	17	0.71	3,865	0.51
20-29	9	25.71	219	22.26	516	21.65	126,105	16.73
30-39	12	34.29	452	45.93	1081	45.36	337,501	44.77
40-49	10	28.57	231	23.48	539	22.62	196,526	26.07
50+	4	11.43	68	6.91	218	9.15	81,103	10.76
Unknown	0	0.00	0	0.00	0	0.00	3	0.00
Total	35	100.00	984	100.00	2383	100.00	753,907	100.00
<b>Race/Ethnicity</b>								
White, Non-Hispanic	19	54.29	667	67.78	1780	74.50	324,822	43.09
Black, Non-Hispanic	7	20.00	209	21.24	416	17.46	282,720	37.50
Hispanic, Non-White	8	22.86	90	9.15	151	6.33	137,575	18.25
Asian/Pacific Islander	1	2.86	5	0.51	11	0.46	5,546	0.74
American Native/Alaska Native	0	0.00	12	1.22	23	0.97	381	4.33
Unknown	0	0.00	1	0.10	1	0.04	1,010	0.13
Total	35	100.00	984	100.00	2383	100.00	753,907	100.00
<b>Gender</b>								
Male	32	91.43	850	86.38	2144	89.97	624,714	82.86
Female	3	8.57	134	13.62	239	10.03	129,190	17.14
Unknown	0	0.00	0	0.00	0	0.00	3	0.00
Total	35	100.00	984	100.00	2383	100.00	753,907	100.00
<b>Adult/Adolescent Exposure Category</b>								
Men who have sex with men (MSM)	18	51.43	573	68.64	1524	64.41	348,657	46.79
Injection Drug User (IDU)	1	2.86	105	10.75	226	9.55	189,242	25.40
MSM and IDU	5	14.29	96	9.83	219	9.26	47,820	6.42
Hemophilia and/or Coagulation Disorder	0	0.00	9	0.92	41	1.73	5,121	0.69
High Risk Heterosexual Contact	3	8.57	137	14.02	217	9.17	78,210	10.50
Transfusion/Transplant	0	0.00	10	1.02	47	1.99	8,666	1.16
Risk Not Known	8	22.86	47	4.81	92	3.89	67,387	9.04
Total	35	100.00	977	100.00	2366	100.00	745,103	100.00
<b>Pediatric (&lt;13 years) Category</b>								
Hemophilia and/or Coagulation Disorder	0	0.00	2	28.57	5	29.41	236	2.68
Mother with HIV infection	0	0.00	3	42.86	10	58.82	8,027	91.17
Transfusion/Transplant	0	0.00	1	14.29	1	5.88	381	4.33
Risk Not Known	0	0.00	1	14.29	1	5.88	160	1.82
Total	0	0.00	7	100.00	17	100.00	8,804	100.00

\* Incidence is the number of new cases in a specific time.

\*\* Prevalent cases are those people presumed living with HIV and AIDS.

\*\*\* Cumulative cases are those people ever reported with HIV and AIDS.

Percentages do not add up to 100 due to rounding.

**Kansas Incidence, Prevalence and Cumulative HIV Cases as of December 2001**

	Kansas Incident* HIV Cases July 2001 - Dec 2001		Kansas Prevalent*** HIV Cases as of Dec 2001		Kansas Cumulative*** HIV Cases as of December 2001		U.S. Cumulative*** HIV Cases as of July 2001	
Cases	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Adult/Adolescent	42	100.00	318	98.45	326	98.49	128,618	98.42
Pediatrics (<13 Years)	0	0.00	5	1.55	5	1.51	2,068	1.58
Total	42	100.00	323	100.00	331	100.00	130,686	100.00
<b>Age</b>								
<13	0	0.00	5	1.55	5	1.51	2,063	1.58
13-19	1	2.48	16	4.95	16	4.83	5,262	4.04
20-29	13	30.95	92	28.48	92	27.79	43,451	33.33
30-39	15	35.71	135	41.80	137	41.39	50,379	38.65
40-49	9	21.43	54	16.72	57	17.22	21,835	16.75
50+	4	9.52	21	6.50	24	7.25	7,351	5.64
Unknown	0	0.00	0	0.00	0	0.00	11	0.01
Total	42	100.00	323	100.00	331	100.00	130,352	100.00
<b>Race/Ethnicity</b>								
White, Non-Hispanic	26	61.90	194	60.06	199	60.12	48,878	37.50
Black, Non-Hispanic	8	19.04	77	23.84	77	23.26	68,183	52.31
Hispanic, Non-White	4	9.52	31	9.60	33	9.97	10,281	7.89
Asian/Pacific Islander	0	0.00	1	0.31	2	0.60	506	0.39
American Native/Alaska Native	1	0.00	2	0.62	2	0.60	824	0.63
Unknown	3	2.38	18	5.57	18	5.44	1,680	1.29
Total	42	100.00	323	100.00	331	100.00	130,352	100.00
<b>Gender</b>								
Male	36	85.71	262	81.11	269	81.27	93,527	71.75
Female	6	14.29	61	18.89	62	18.73	36,814	28.24
Unknown	0	0.00	0	0.00	0	0.00	11	0.01
Total	42	100.00	323	100.00	331	100.00	130,352	100.00
<b>Adult/Adolescent Exposure Category</b>								
Men who have sex with men (MSM)	25	59.52	154	48.43	156	47.85	41,818	32.60
Injection Drug User (IDU)	5	11.90	38	11.95	39	11.96	19,720	15.37
MSM and IDU	1	2.38	27	8.49	27	8.28	5,752	4.48
Hemophilia and/or Coagulation Disorder	0	0.00	0	0.00	0	0.00	462	0.36
High Risk Heterosexual Contact	3	7.14	46	14.47	46	14.11	21,143	16.48
Transfusion/Transplant	0	0.00	3	0.94	3	0.92	791	0.62
Risk Not Known	8	19.05	50	15.72	55	16.87	38,603	30.09
Total	42	100.00	318	100.00	326	100.00	128,289	100.00
<b>Pediatric (&lt;13 years) Category</b>								
Hemophilia and/or Coagulation Disorder	0	0.00	1	20.00	1	20.00	98	4.75
Mother with HIV infection	0	0.00	4	80.00	4	80.00	1,782	86.38
Transfusion/Transplant	0	0.00	0	0.00	0	0.00	37	1.79
Risk Not Known	0	0.00	0	0.00	0	0.00	146	7.08
Total	0	0.00	5	100.00	5	100.00	2,063	100.00

\* Incidence is the number of new cases in a specific time.

\*\* Prevalent cases are those people presumed living with HIV and AIDS.

\*\*\* Cumulative cases are those people ever reported with HIV and AIDS.

Percentages do not add up to 100 due to rounding.



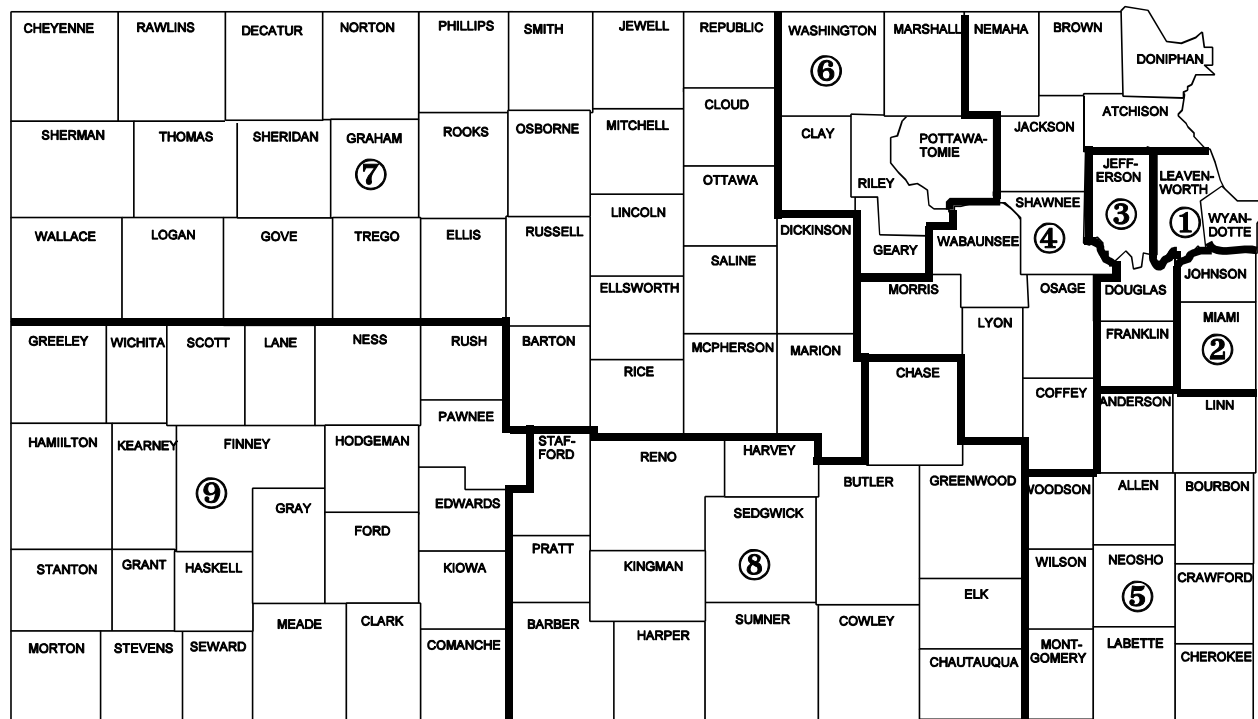
### AIDS Cases by Exposure Category and Gender Reported between July 1999 – December 2001

Adult/Adolescent Exposure/Category	Male		Female		Total	
	Prevalence No. (%)	Cumulative No. (%)	Prevalence No. (%)	Cumulative No. (%)	Prevalence No. (%)	Cumulative No. (%)
Men who have sex with men (MSM)	573 (68)	1524 (71)	-	-	573 (59)	1524 (64)
Injection Drug Users (IDU)	75 (9)	165 (8)	30 (23)	61 (26)	105 (11)	226 (10)
MSM and IDU	96 (11)	219 (10)	-	-	96 (10)	219 (9)
Hemophilia/Coagulation Disorder	9 (1)	41 (2)	0 (0)	0 (0)	9 (1)	41 (2)
Heterosexual contact	48 (6)	79 (4)	90 (69)	138 (60)	138 (14)	217 (9)
Sex with IDU	5	11	19	37	24	48
Sex with other high risk partner	14	15	29	16	33	-
Sex with HIV infected Person, risk unknown	42	64	56	72	98	136
Transfusion/Transplant	7 (1)	30 (1)	3 (2)	17 (7)	10 (1)	47 (2)
Risk Not Known	39 (5)	77 (4)	7 (5)	15 (6)	46 (5)	92 (4)
Adult/Adolescent total	847 (100)	2135 (100)	130 (100)	231 (100)	977 (100)	2366 (100)
Pediatric (<13 years old)					7	17
Percentages do not add up to 100 due to rounding.				Total Cases	984	2383

### HIV Cases by Exposure Category and Gender Reported between July 1999 – December 2001

Adult/Adolescent Exposure/Category	Male		Female		Total	
	Prevalence No. (%)	Cumulative No. (%)	Prevalence No. (%)	Cumulative No. (%)	Prevalence No. (%)	Cumulative No. (%)
Men who have sex with men (MSM)	154 (59)	156 (58)	-	-	154 (48)	156 (48)
Injection Drug Users (IDU)	22 (8)	23 (9)	16 (28)	16 (27)	38 (12)	39 (12)
MSM and IDU	27 (10)	27 (10)	-	-	27 (89)	27 (8)
Hemophilia/Coagulation Disorder	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Heterosexual contact	18 (7)	18 (7)	28 (48)	28 (47)	46 (14)	46 (14)
Sex with IDU	2	2	6	7	9	9
Sex with other high risk partner	0	0	2	2	2	2
Sex with HIV infected Person, risk unknown	16	16	20	19	35	35
Transfusion/Transplant	3 (1)	3 (1)	0 (0)	0 (0)	3 (1)	3 (1)
Risk Not Known	36 (14)	40 (15)	15 (27)	15 (25)	50 (16)	55 (17)
Adult/Adolescent total	260 (100)	267 (100)	58 (100)	59 (100)	318 (100)	326 (100)
Pediatric (<13 years old)					5	5
Percentages do not add up to 100 due to rounding.				Total Cases	323	331

## Kansas Community Planning Regions



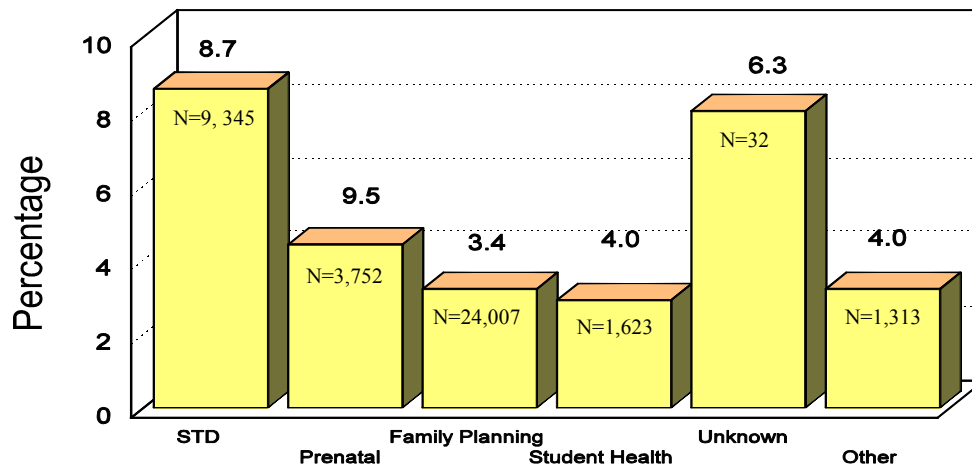
Region	Prevalent* HIV Cases as of Dec 2001	Cumulative** HIV Cases as of Dec 2001	Prevalent* AIDS Cases as of Dec 2001	Cumulative** AIDS Cases as of Dec 2001
1	60	61	225	470
2	40	40	164	417
3	10	10	43	99
4	31	35	88	237
5	16	16	23	112
6	7	7	27	82
7	11	11	37	87
8	136	137	352	812
9	11	13	25	67
Unknown	1	1	0	0
<b>Total</b>	<b>323</b>	<b>331</b>	<b>984</b>	<b>2383</b>

\* Prevalent cases are those people presumed living with HIV or AIDS.

\*\* Cumulative cases are those people ever reported with HIV or AIDS.

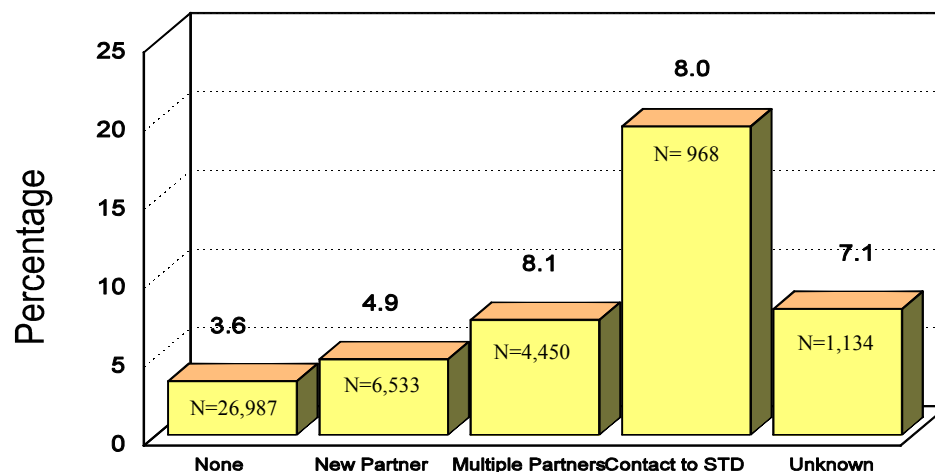
## Kansas Infertility Prevention Project (KIPP) January - December 2001

### Percentage Chlamydia Positive by Clinic



40,072 Screens: 1,917 Positives

### Percentage Chlamydia Positive by Risk Factor



40,072 Screens: 1,917 Positives

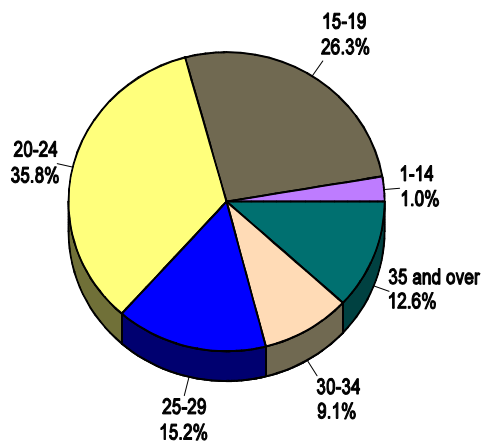
**Positivity is highest in STD clinics and contacts to STDs.**

This was consistent with screenings across Region VII (Kansas, Missouri, Nebraska, and Iowa).

## KIPP Sites Screened 40,072 Patients for Chlamydia: 1,917 or 4.8% Were Positive

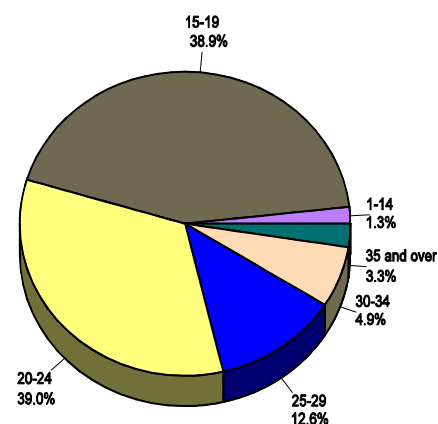
Percent Tests by Age Group

n = 40,072

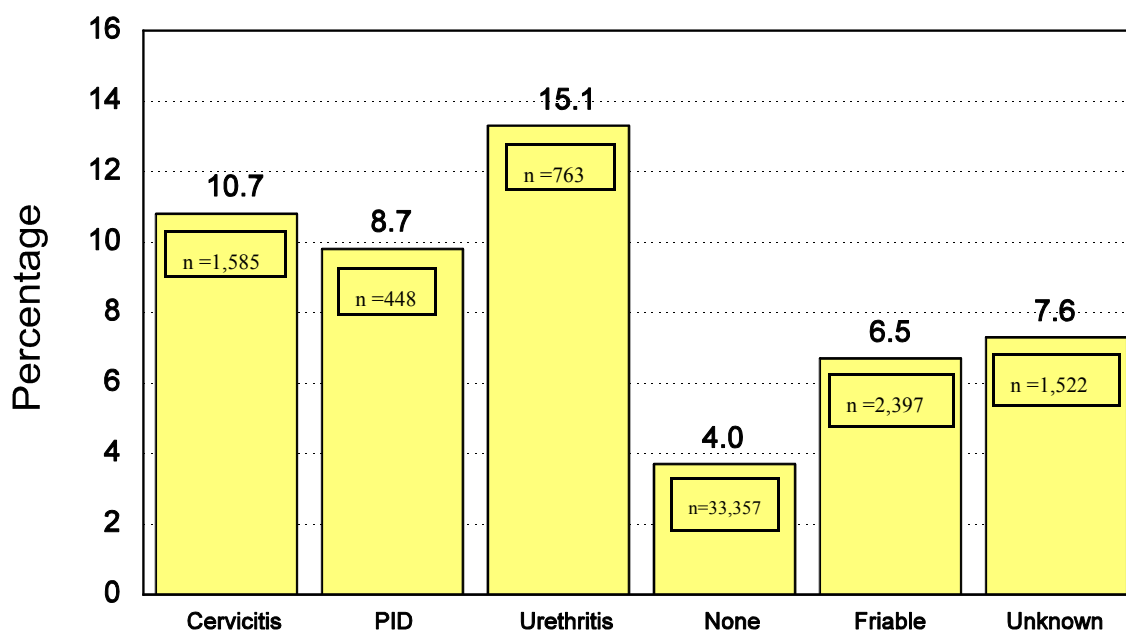


Percent Positive by Age Group

n = 1,917



## Chlamydia Test Results by Clinical Signs



Chlamydia screenings are directed at the age groups most at risk in Kansas.

**Kansas Incidence, Prevalence and Cumulative AIDS Cases as of June 2002**

	Kansas Incident* AIDS Cases January 2002 - June 2002		Kansas Prevalent*** AIDS Cases as of June 2002		Kansas Cumulative*** AIDS Cases as of June 2002		U.S. Cumulative*** AIDS Cases as of July 2001	
Cases	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Adult/Adolescent	20	100.00	986	99.60	2393	99.50	745,103	98.83
Pediatrics (<13 Years)	0	0.00	4	0.40	12	0.50	8,804	1.17
Total	20	100.00	990	100.00	2405	100.00	753,907	100.00
<b>Age</b>								
<13	0	0.00	4	0.40	12	0.50	8,804	1.17
13-19	0	0.00	10	1.01	17	0.71	3,865	0.51
20-29	2	10.00	219	22.12	518	21.54	126,105	16.73
30-39	7	35.00	449	45.35	1089	45.28	337,501	44.77
40-49	7	35.00	237	23.94	547	22.74	196,526	26.07
50+	4	20.00	71	7.18	222	9.23	81,103	10.76
Unknown	0	0.00	0	0.00	0	0.00	3	0.00
Total	20	100.00	990	100.00	2405	100.00	753,907	100.00
<b>Race/Ethnicity</b>								
White, Non-Hispanic	15	75.00	668	67.48	1796	74.68	324,822	43.09
Black, Non-Hispanic	3	15.00	212	21.41	420	17.46	282,720	37.50
Hispanic, Non-White	1	5.00	92	9.29	152	6.32	137,575	18.25
Asian/Pacific Islander	0	0.00	5	0.51	11	0.46	5,546	0.74
American Native/Alaska Native	1	5.00	12	1.21	24	1.00	381	4.33
Unknown	0	0.00	1	0.10	2	0.08	1,010	0.13
Total	20	100.00	990	100.00	2405	100.00	753,907	100.00
<b>Gender</b>								
Male	15	75.00	852	86.06	2160	89.81	624,714	82.86
Female	5	25.00	138	13.94	245	10.19	129,190	17.14
Unknown	0	0.00	0	0.00	0	0.00	3	0.00
Total	20	100.00	990	100.00	2405	100.00	753,907	100.00
<b>Adult/Adolescent Exposure Category</b>								
Men who have sex with men (MSM)	8	40.00	576	58.60	1533	64.20	348,657	46.79
Injection Drug User (IDU)	1	5.00	106	10.78	229	9.58	189,242	25.40
MSM and IDU	3	15.00	93	9.46	222	9.30	47,820	6.42
Hemophilia and/or Coagulation Disorder	0	0.00	9	0.92	41	1.71	5,121	0.69
High Risk Heterosexual Contact	4	20.00	142	14.46	222	9.30	78,210	10.50
Transfusion/Transplant	0	0.00	10	1.02	47	1.97	8,666	1.16
Risk Not Known	4	20.00	47	4.76	94	3.94	67,387	9.04
Total	20	100.00	983	100.00	2388	100.00	745,103	100.00
<b>Pediatric (&lt;13 years) Category</b>								
Hemophilia and/or Coagulation Disorder	0	0.00	2	28.57	5	29.41	236	2.68
Mother with HIV infection	0	0.00	3	42.86	10	58.82	8,027	91.17
Transfusion/Transplant	0	0.00	1	14.29	1	5.88	381	4.33
Risk Not Known	0	0.00	1	14.29	1	5.88	160	1.82
Total	0	0.00	7	100.00	17	100.00	8,804	100.00

\* Incidence is the number of new cases in a specific time.

\*\* Prevalent cases are those people presumed living with HIV and AIDS.

\*\*\* Cumulative cases are those people ever reported with HIV and AIDS.

Percentages do not add up to 100 due to rounding.

**Kansas Incidence, Prevalence and Cumulative HIV Cases as of June 2002**

	Kansas Incident* HIV Cases January 2002- June 2002		Kansas Prevalent*** HIV Cases as of June 2002		Kansas Cumulative*** HIV Cases as of June 2002		U.S. Cumulative*** HIV Cases as of July 2001	
Cases	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
Adult/Adolescent	28	100.00	341	98.55	349	98.59	128,618	98.42
Pediatrics (<13 Years)	0	0.00	5	1.45	5	1.41	2,068	1.58
Total	28	100.00	346	100.00	354	100.00	130,686	100.00
<b>Age</b>								
<13	0	0.00	5	1.45	5	1.41	2,063	1.58
13-19	1	3.57	17	54.91	17	4.80	5,262	4.04
20-29	6	21.43	99	28.61	99	27.97	43,451	33.33
30-39	11	39.29	142	41.01	144	40.68	50,379	38.65
40-49	8	28.58	59	17.05	62	17.51	21,835	16.75
50+	2	7.14	24	76.94	67	7.63	7,351	5.64
Unknown	0	0.00	0	0.00	0	0.00	11	0.01
Total	28	100.00	346	100.00	354	100.00	130,352	100.00
<b>Race/Ethnicity</b>								
White, Non-Hispanic	13	46.43	202	58.38	207	58.47	48,878	37.50
Black, Non-Hispanic	10	35.71	88	25.43	88	24.86	68,183	52.31
Hispanic, Non-White	4	14.29	34	9.83	36	10.18	10,281	7.89
Asian/Pacific Islander	1	3.57	2	0.58	3	0.85	506	0.39
American Native/Alaska Native	0	0.00	2	0.58	2	0.56	824	0.63
Unknown	0	0.00	18	5.20	18	5.08	1,680	1.29
Total	28	100.00	346	100.00	354	100.00	130,352	100.00
<b>Gender</b>								
Male	23	82.14	281	81.21	288	81.36	93,527	71.75
Female	5	17.86	65	18.79	66	18.64	36,814	28.24
Unknown	0	0.00	0	0.00	0	0.00	11	0.01
Total	28	100.00	346	100.00	354	100.00	130,352	100.00
<b>Adult/Adolescent Exposure Category</b>								
Men who have sex with men (MSM)	15	53.57	165	48.39	167	47.85	41,818	32.60
Injection Drug User (IDU)	3	10.72	42	12.32	43	12.32	19,720	15.37
MSM and IDU	0	0.00	26	7.62	26	7.45	5,752	4.48
Hemophilia and /or Coagulation Disorder	0	0.00	0	0.00	0	0.00	462	0.36
High Risk Heterosexual Contact	2	7.14	48	14.08	48	13.75	21,143	16.48
Transfusion/Transplant	0	0.00	3	0.88	3	0.86	791	0.62
Risk Not Known	8	28.57	57	16.71	62	17.77	38,603	30.09
Total	28	100.00	341	100.00	349	100.00	128,289	100.00
<b>Pediatric (&lt;13 years) Category</b>								
Hemophilia and/or Coagulation Disorder	0	0.00	1	20.00	1	20.00	98	4.75
Mother with HIV infection	0	0.00	4	80.00	4	80.00	1,782	86.38
Transfusion/Transplant	0	0.00	0	0.00	0	0.00	37	1.79
Risk Not Known	0	0.00	0	0.00	0	0.00	146	7.08
Total	0	0.00	5	100.00	5	100.00	2,063	100.00

\* Incidence is the number of new cases in a specific time.

\*\* Prevalent cases are those people presumed living with HIV and AIDS.

\*\*\* Cumulative cases are those people ever reported with HIV and AIDS.

Percentages do not add up to 100 due to rounding.

**AIDS Cases by Exposure Category and Gender Reported between as of June 2002**

Adult/Adolescent Exposure/Category	Male				Female				Total			
	Prevalence		Cumulative		Prevalence		Cumulative		Prevalence		Cumulative	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Men who have sex with men (MSM)	576	(68)	1533	(71)	-		-		576	(59)	1533	(64)
Injection Drug Users (IDU)	75	(9)	167	(8)	31	(23)	62	(26)	106	(11)	229	(10)
MSM and IDU	93	(11)	222	(10)	-		-		93	(10)	222	(9)
Hemophilia/Coagulation Disorder	9	(1)	41	(2)	0	(0)	0	(0)	9	(1)	41	(2)
Heterosexual contact	49	(6)	80	(4)	93	(69)	142	(60)	142	(14)	222	(9)
<i>Sex with IDU</i>	7		13		19		37		26		50	
<i>Sex with other high risk partner</i>	1		4		15		29		16		33	
<i>Sex with HIV infected Person, risk unknown</i>	41		63		59		76		100		139	
Transfusion/Transplant	7	(1)	30	(1)	3	(2)	17	(7)	10	(1)	47	(2)
<u>Risk Not Known</u>	40	(5)	78	(4)	7	(5)	16	(6)	47	(5)	94	(4)
Adult/Adolescent total	849	(100)	2151	(100)	134	(100)	237	(100)	983	(100)	2388	(100)

Pediatric (&lt;13 years old)

Percentages do not add up to 100 due to rounding.

	7	17
Total Cases	990	2405

**HIV Cases by Exposure Category and Gender Reported between July 1999 – June 2002**

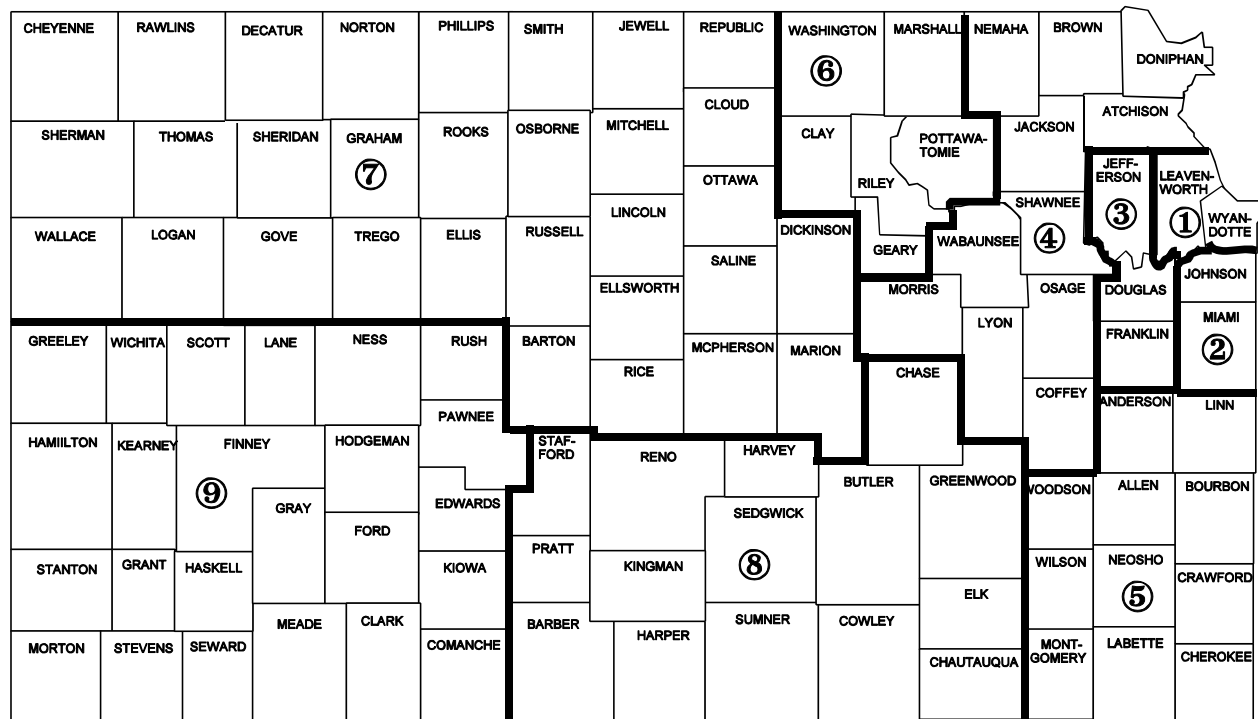
Adult/Adolescent Exposure/Category	Male				Female				Total			
	Prevalence		Cumulative		Prevalence		Cumulative		Prevalence		Cumulative	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Men who have sex with men (MSM)	165	(59)	167	(58)	-		-		165	(48)	167	(48)
Injection Drug Users (IDU)	25	(8)	26	(9)	17	(28)	17	(27)	42	(12)	43	(12)
MSM and IDU	26	(10)	26	(10)	-		-		26	(89)	26	(8)
Hemophilia/Coagulation Disorder	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
Heterosexual contact	20	(7)	20	(7)	28	(48)	28	(47)	48	(14)	48	(14)
<i>Sex with IDU</i>	3		3		7		7		10		10	
<i>Sex with other high risk partner</i>	0		0		2		2		2		2	
<i>Sex with HIV infected Person, risk unknown</i>	17		17		19		19		36		36	
Transfusion/Transplant	3	(1)	3	(1)	0	(0)	0	(0)	3	(1)	3	(1)
<u>Risk Not Known</u>	40	(14)	44	(15)	17	(27)	18	(25)	57	(16)	62	(17)
Adult/Adolescent total	279	(100)	286	(100)	62	(100)	63	(100)	341	(100)	349	(100)

Pediatric (&lt;13 years old)

Percentages do not add up to 100 due to rounding.

	5	5
Total Cases	346	354

## Kansas Community Planning Regions



Region	Prevalent* HIV Cases as of June 2002	Cumulative** HIV Cases as of June 2002	Prevalent* AIDS Cases as of June 2002	Cumulative** AIDS Cases as of June 2002
1	60	61	226	474
2	43	43	165	418
3	10	10	42	99
4	28	32	89	240
5	19	19	24	113
6	7	7	28	84
7	12	12	37	87
8	139	140	348	817
9	11	13	27	69
Unknown	17	17	4	4
<b>Total</b>	<b>346</b>	<b>354</b>	<b>990</b>	<b>2405</b>

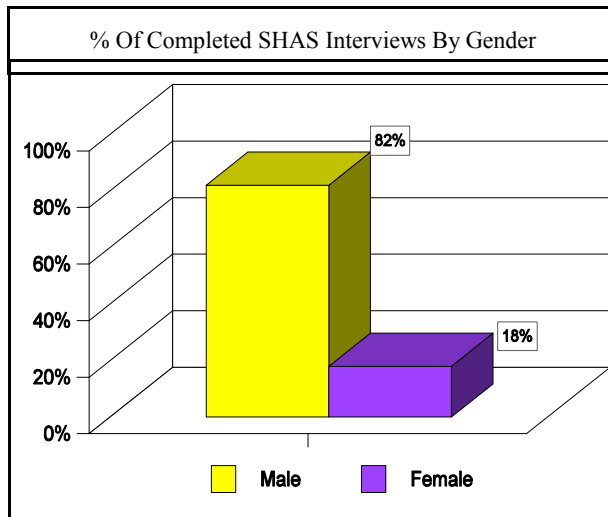
\* Prevalent cases are those people presumed living with HIV or AIDS.

\*\* Cumulative cases are those people ever reported with HIV or AIDS.

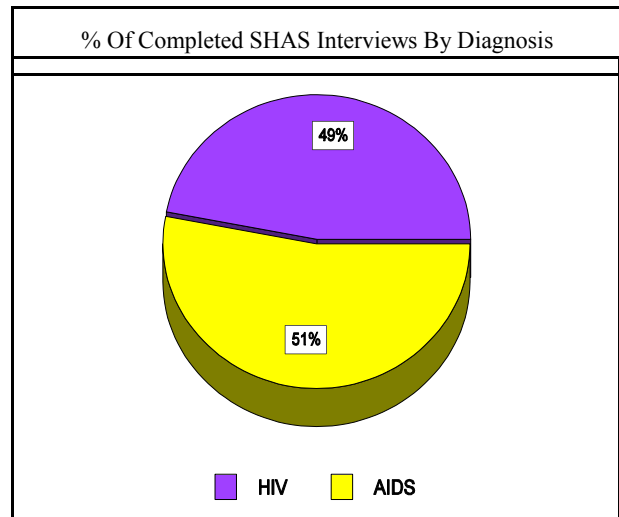


### SUPPLEMENT TO HIV AND AIDS SURVEILLANCE PROJECT (SHAS)

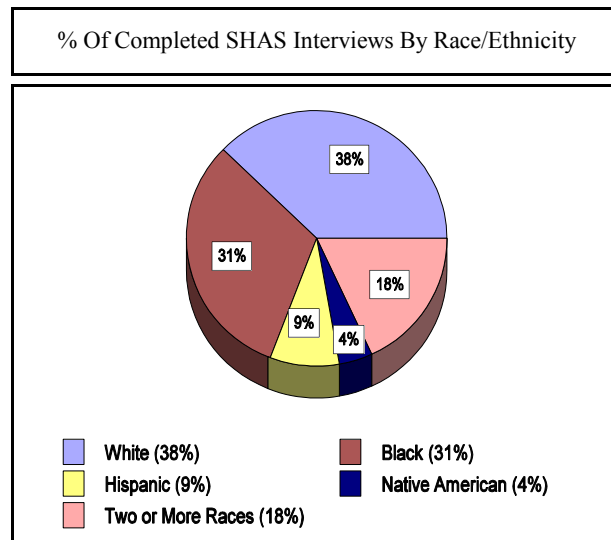
The SHAS Project is an in-depth interview designed to learn more about the problems faced by people living with HIV/AIDS in Kansas. The information obtained from this research will help in planning service programs that better meet the needs of the individuals in Kansas that are living with HIV/AIDS. It will also be used to help target prevention efforts in assessing the populations in Kansas with the greatest risk of infection. From August 1, 2001 to July 31, 2002, 55 participants have been interviewed. The following four charts illustrate the demographics of the participants. For further information you may call Jeni Trimble at 785-296-5597.



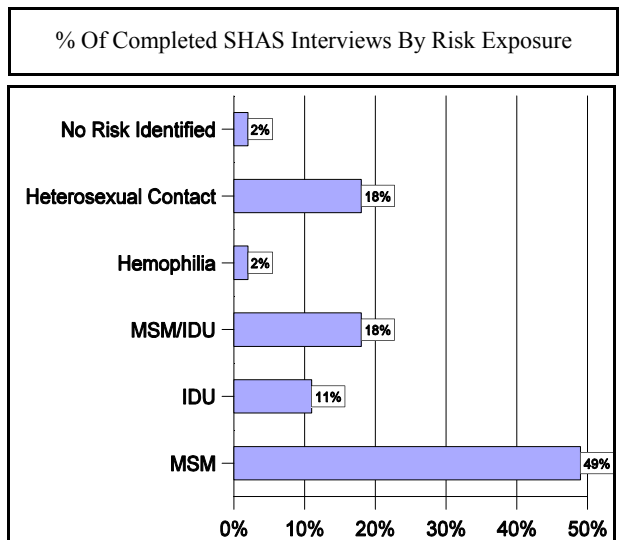
N=55



N=55



N=55



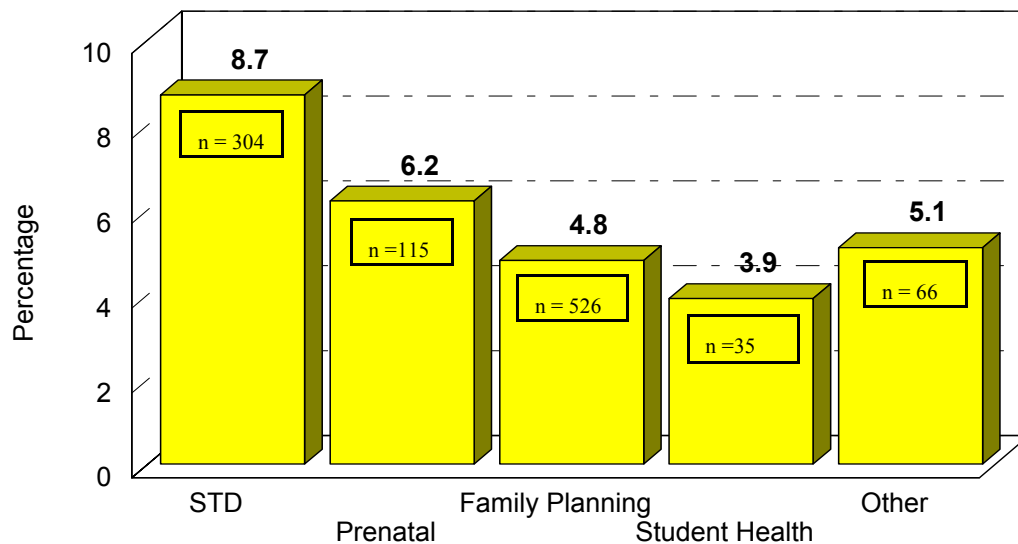
N=55

## Kansas Infertility Prevention Project (KIPP)

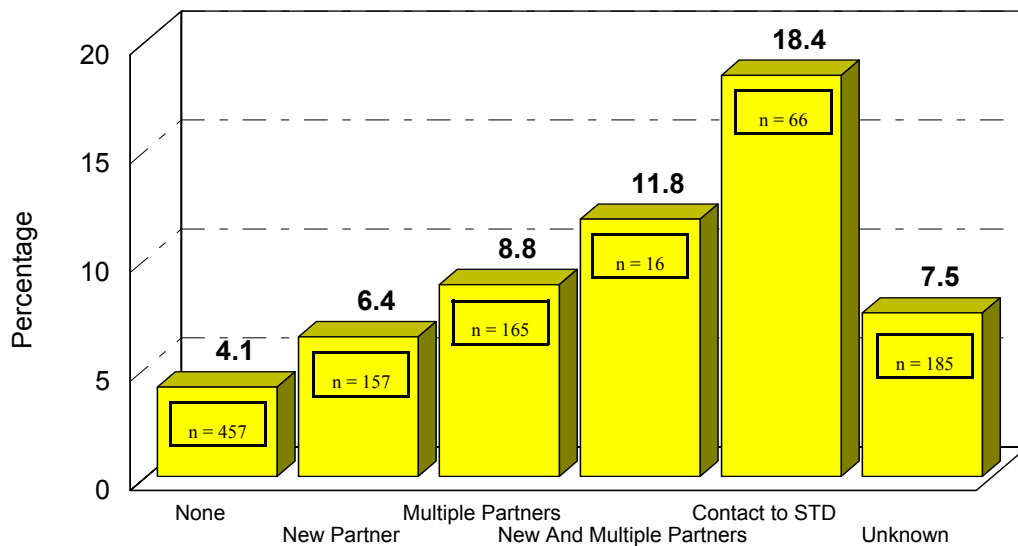
Jan - June 2002

18,273 Females Screened: 1046 Positives

### Percentage Chlamydia Positive by Clinic



### Percentage Chlamydia Positive by Risk Factor



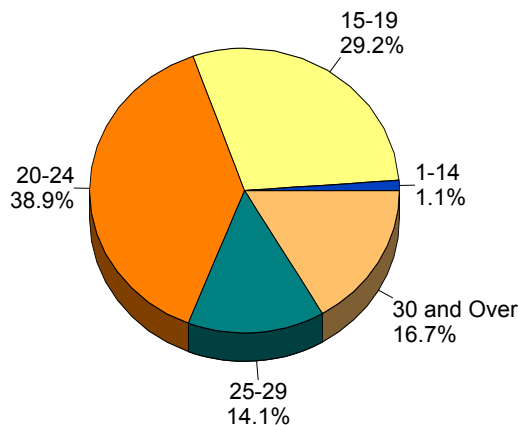
18,273 Females Screened: 1046 Positives

**Positivity is highest in STD clinics and contacts to STDs.**

## KIPP Sites Screened 18,273 Females for Chlamydia Jan-June 2002 1046 or 5.7% Were Positive

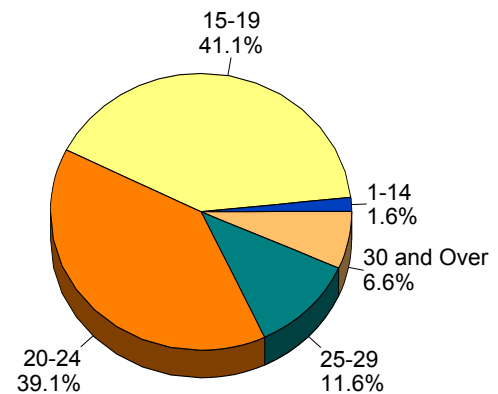
### Percent Tests by Age Group

n=18,273



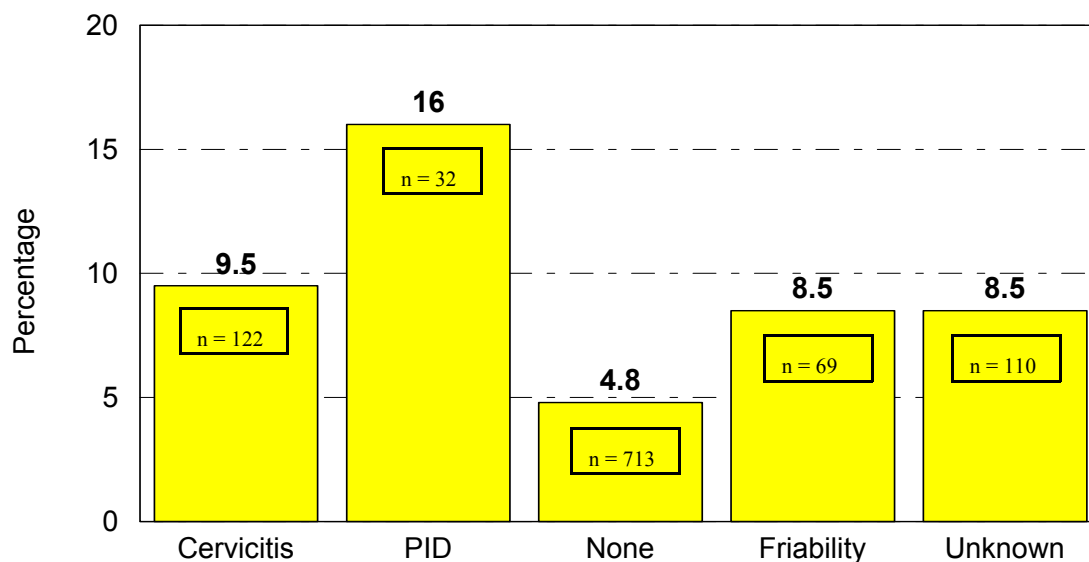
### Percent Positive by Age Group

n=1046



**Chlamydia screenings are directed at the age groups most at risk in Kansas.**

## Chlamydia Test Results by Clinical Signs



**18,273 Females Screened: 1046 Positives**

In FH2002, KIPP changed screening criteria to include all females in Prenatal and STD clinics and all females 24 years of age and under in Family Planning Clinics in addition to females 25 to 29 years of age in Family Planning Clinics that have symptoms of a chlamydial infection or have had sexual contact with a male with a positive test for an STD or urethritis. Males should not be tested as part of the Infertility Prevention Project.